	Collin C	ounty Gra	<u>nt Summa</u>				
Department Name			Submit completed form along with one electronic copy of the				
Collin County WIC Department			grant application and all supporting documentation to the				
Contact Person (Grant Liaison)			Auditor's Office not less than 14 days prior to the scheduled				
Jannette Sepeda			Commissioner Court meeting. If you have any questions contact Janna Caponera at (972) 548-4638.				
Title	Phone / Exten	sion	COMICACI Janina	Caponera at (91	2) 540-4030.		
WIC Director	3357						
		Grant De	scription				
Grant Title and Funding Ye	ar		Funding Source Applicati			ion Type	
WIC Contract Number 2016-048746-001			✓ State		nt		
Grantor (include sub-granting agencies)			☐ Federal ☑ Renewal				
			☐ Other: ☐ Amendment		ent		
Department of State Health Services (DSHS)			Payment Method				
			✓ Cost Reimbursement ☐ Other:				
Application/Award Deadlin	e Requested Co	mm. Court	Grant Period				
October 1, 2015	Novembe	er 2, 2015	October	1, 2015 to	Septembe	er 30, 2016	
Brief Description	-						
Renewal of WIC contract. A	mount of contract	\$1,613,170.00.	Contractor shal	l administer the	Department of	State Health	
Services (DSHS) Special Su	pplemental Nutrition	on Program for \	Nomen, Infant a	and Children. (V	VIC) To provide	supplemental	
food instrument, nutrition edu	ucation, and couns	seling to enhanc	e good health a	t not cost to low	/-income pregna	int and	
postpartum women, infants a	and children identif	ied to be a nurti	onal risk.				
				_			
Grant Categories /	Federal Funds	State Funds	Local Funds	County	In-Kind	Total	
Funding Sources				Match	Match		
Personnel	\$ -	1,613,170.00	\$ -		\$ -	#########	
Operating	\$ -		\$ -		\$ -	\$ -	
Capital Equipment	\$ -		\$ -		\$ -	\$ -	
Indirect Costs	\$ -		\$ -		\$ -	\$ -	
Total	\$ -	#########	\$ -	\$ -	\$ -	##########	
# of FTEs						0	
Dowformon on Mo.			Current EV Dr	ourses to Date		Novt EV	
Performance Me		04		ogress to Date		Next FY	
Applicable Outcome	Measures	Q1	Q2	Q3	Q4	Projected	
NE/Counseling services at the		93.2	88.6	96.4	97.3	95.1	
voucher issuance (an averac	<u>16 95%)</u>						
Percentage of women in first		35.6	34.5	31.6	28.1	33.1	
certification (20% per quarter							
Percentage of enrolled client	•	86.3	84	84.1	85.4	85.3	
vouchers during the report percentage or clients that rec		00.0	01	0	00.1	00.0	
because they indicated they		98.4	100	100	98.5	99.4	
of health care	navo no ocarco	30.4	100	100	30.0	00.1	
The Department named abort for the management of any forth by the Grantor and its redepartments. To that end, position of the Grant Summary Form Memo of request to Corollary Electronic copy of the Approval to apply Court	unds awarded to the lated agencies of lease find enclose of ommissioner Court original, complete rt Order (for award	he County under agents, as well d the following it t for application/ d application/aw d only)	r this grant, and as those of the tems for initial refaward acceptared	will adhere to a County, and its eview:	any polices and positions and actions are actions and actions and actions are actions and actions are actions and actions are actions and actions are actions as a constant actions are actions actions actions are actions actions are actions actions actions are actions actions actions are actions actions actions are actions actions are actions actions actions actions actions actions are actions actions actions actions actions actions actions actions actions are actions action	orocedures se	
Completed by: Candy Blair		Candy Blair,	HCA		10/14/201		

Signature

Date

Department Head / Designee Printed Name

Grant Resource-Benefit Summary

Grant Title				n (Grant Liaison)	Preliminary
WIC Contract Number 2016-0 Grant Period)48746-001		Jannette Seped Phone / Ext	Department	Final
October 1, 2015	to Septe	mber 30, 2016	3357	Collin County WIC Department	
October 1, 2013	to Septe	111ber 30, 2010	3337	Commit County WIC Department	
COUNTY RESOURCES REQ	UIRED				
Match	Amoun	t Identify	Match Source	Benefits to County and Citizens	
1) Cash	\$	-		Renewal of WIC contract. Contractor sha State Health Services (DSHS) Special St	
2) In-Kind	\$	-		Women, Infant and Children. (WIC) To p instrument, nutrition education, and coun	rovide supplemental food
✓ No Match Required				not cost to low-income pregnant and pos	
Implementation / Start Up	Amoun	t D	escription	children identified to be a nurtional risk.	
1) Equipment					
2) Training					
3) Inter-departmental / Other	:				
☑ No Implem / Start-up Cost	ts				
Operational / Maintenance	Amoun	t D	escription	,	
1) Recurring Maintenance					
2) Salary / Benefits					
3) Continuing Ed / Training					
4) Office / Program Space					
5) Travel					
6) Other:					
☑ No Oper / Maintenance C	osts				
NON-COUNTY RESOURCES	REQUIRED				
Match	Amoun	t Identify	Match Source	1	
1) Voluntary / Donation	¢	- 0			